PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

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Effective on 12/08	Complete if Known						
Fees pursuant to the Consolidated Approp	Application Number 09		09/671,571-Conf. #4634				
FEE TRANS	Filing Date September 2		September 27	27, 2000			
	First Named Inventor Avery		very Li-Chur	ery Li-Chun Wang			
For FY 20	Examiner Name A. C		A. Q. Choudh	. Q. Choudhury			
Applicant claims small entity stat	Art Unit 2145		145				
TOTAL AMOUNT OF PAYMENT	(\$) 950.00	Attorney Docket	No. 6	9323/P002U	S/1051108	31	
METHOD OF PAYMENT (check all that apply)							
x Check Credit Card	Money Order No	one Other	(please identi	fy):			
Deposit Account Deposit Account	Number: 06-2380 Deposit Ac	count Name:	Fulbri	ight & Jawors	ki L.L.P.		
For the above-identified depo	osit account, the Director i	s hereby authoriz	ed to: (chec	k all that apply))		
Charge fee(s) indicated	d below	Charg	e fee(s) indi	cated below, e	xcept for tl	ne filing fee	
Charge any additional fee(s) under 37 CFR 1	fee(s) or underpayment of .16 and 1.17	x Credit	any overpa	yments			
FEE CALCULATION		.			· · · · · · · · · · · · · · · · · · ·		
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES						
		ARCH FEES	EXAMIN	ATION FEES	;		
Annelia dia Tama	Small Entity	Small Entity	F (¢)	Small Entity	F F)_:_! (()	
Application Type Fee (\$			Fee (\$)	Fee (\$)	rees r	Paid (\$)	
Utility 300	150 500		200	100			
Design 200	100 100		130	65			
Plant 200	100 300		160	80			
Reissue 300	150 500		600	300			
Provisional 200	100 0	0	0	0			
2. EXCESS CLAIM FEES						Small Entity	
Fee Description Fee (\$)							
Each claim over 20 (including Reiss	•				50	25	
Each independent claim over 3 (incl	uding Reissues)				200	100	
Multiple dependent claims		D - 1 - 1 (A)		Wala Barra	360	180	
Total Claims Extra Claims		Paid (\$)	<u>Multiple Depende</u> Fee (\$) <u>F</u>				
- 20 =	x =		ree) (\$)	Fee Paid (\$	7	
Indep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)				-	
-3=	× =						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 3				inty) for each a	idditional 5	U	
Total Sheets Extra Sheet				Fee (\$)	Fee I	Paid (\$)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00							
1401 Notice of appeal 500.00							
SUBMITTED BY							
Signature /delign x	10/00/01 01	Registration No.	52,966	Telephone	(214) 85	5-7430	
Name (Print/Type) Robert L. Greeso	/ Walson	(Attorney/Agent)		<u> </u>	December		



PTO/SB/21 (09-04)

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Approved for use through 07/31/2006. OMB 0651-0303 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Hinder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 09/671,571-Conf. #4634 Filing Date **TRANSMITTAL** September 27, 2000 **FORM** First Named Inventor Avery Li-Chun Wang Art Unit 2145 (to be used for all correspondence after initial filing) **Examiner Name** A. Q. Choudhury Attorney Docket Number Total Number of Pages in This Submission 5 69323/P002US/10511081 ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please x Extension of Time Request Terminal Disclaimer Identify below): Return Receipt Postcard **Express Abandonment Request** Request for Refund Certificate of Express Mailing Check in the amount of \$950 Information Disclosure Statement CD, Number of CD(s) Notice of Appeal Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name FULBRIGHT & JAWORSKI L.L.P. Signature Printed name Robert L. Greeson Date Reg. No.

December 29, 2005



Application No. (if known): 09/671,571

Attorney Docket No.: 69323/P002US/10511081

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Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1

page)